2254 1983 ✓
FILING FEE PAID
Yes ___ No ✓
IFP MOTION FILED
Yes ✓ No ___
COPIES SENT TO
Court ✓ ProSe ___

FILED
MAR - 5 2008
CLERK, U.S. DISTRICT COURT
SOUTHERN DISTRICT OF CALIFORNIA
BY ___ DEPUTY

FILED
JAN 3 1 2008
RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

E-filing

'08 CV 0423 L RBB

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

RMW

T13047 Chadwick ARDY Demetrius PRISONER/PLAINTIFF, v. San Diego Police Department DEFENDANT(S).	CASE NUMBER CV 08 0746 **REQUEST TO PROCEED WITHOUT PREPAYMENT OF FILING FEES WITH DECLARATION IN SUPPORT**

(PR)

I, Chadwick ARDY Demetrius, declare under penalty of perjury, that the following is true and correct; that I am the prisoner-plaintiff in the above entitled case; that in support of my request to proceed without prepayment of fees under 28 U.S.C. Section 1915, I declare that because of my poverty I am unable to pay the full costs of said proceedings or to give security therefore and that I am entitled to redress.

I further declare under penalty of perjury that the responses which I have made to the questions and instructions below are true, correct and complete.

1. Are you presently employed in prison? ☒Yes ☐No
   a. If the answer is yes, state the number of hours you work per week and the hourly rate of pay:
      0600-0900 1100-1300 1700-1900
      I do not get pay for my job.
   b. State the place of your incarceration CMC.
      Have the institution fill out the Certificate portion of this application and attach a certified copy of your prison trust account statement showing transactions for the past six months.

2. Have you received, *within the past twelve months*, any money from any of the following sources?
   a. Business, profession or form of self-employment? ☐Yes ☒No
   b. Rent payments, interest or dividends? ☐Yes ☒No
   c. Pensions, annuities or life insurance payments? ☐Yes ☒No
   d. Gifts or inheritances? ☐Yes ☒No
   e. Any other income (other than listed above)? ☐Yes ☒No
   f. Loans? ☐Yes ☒No

   If the answer to any of the above is yes, describe such source of money and state the amount received from each source during the past twelve (12) months: ___

3. Do you own any cash, or do you have money in a checking or savings account? (Include any funds in prison accounts, if applicable.) ☐ Yes ☒ No

If the answer is yes, identify each account and separately state the amount of money held in each account for each of the *six (6) months prior* to the date of this declaration.

____

4. Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ☐ Yes ☒ No

If the answer is yes, describe the property and state it approximate value: ______________________________

5. In what year did you last file an Income Tax Return? 86

Approximately how much income did your last tax return reflect? 500.00 IF I Remember.

6. List the persons who are dependent upon your for support, state your relationship to those persons, and indicate how much you contribute toward their support:

____

I understand that a false statement or answer to any question in this declaration will subject me to penalties for perjury. I further understand that perjury is punishable by a term of imprisonment of up to five (5) years and/or a fine of $250,000 (18 U.S.C. Sections 1621, 3571).

C.A
State

San Diego C.A.
County (or City)

I, ARDY D Chadwick., declare under penalty of perjury that the foregoing is true and correct.

1/12/08
Date

ARDY D. Chadwick.
Prisoner/Plaintiff (Signature)

PRISONER AUTHORIZATION

If my request to proceed without prepayment of filing fees is granted, I understand that I am required by statue to pay the full amount of the filing fees for this case, regardless of my forma pauperis status and the disposition of this case. I further authorize the prison officials at this institution to assess, collect and forward to the Court the full amount of these fees, in monthly payments based on the average of deposits to or balance in my prison trust account in accordance with 28 U.S.C. Section 1915.

ARDY Demetrius Chadwick
Prisoner-Plaintiff (Signature)

CERTIFICATE OF AUTHORIZED OFFICER

I hereby certify that the Prisoner-Plaintiff herein has credit in the sum of $____________________ on account at the ______________________________________ institution where Prisoner-Plaintiff is confined.

I further certify that during the past six months the applicant's average monthly balance was $\_\_\_\_\_\_\_\_\_\_. I further certify that during the past six months the average of monthly deposits to the applicant's account was$_______________.

A certified copy of the prisoner-plaintiff's trust account statement for the last six (6) months is attached.

____________________ ____
Date Authorized Officer of Institution (Signature)

Chadwick ARDY D.
PLAINTIFF/PETITIONER/MOVANT'S NAME

T-13047.
PRISON NUMBER

CMC.
PLACE OF CONFINEMENT

PO Box 8101.
ADDRESS

United States District Court
Southern District Of California

Chadwick ARDY D.,
Plaintiff/Petitioner/Movant

v.

San Diego Police Department
Defendant/Respondent

Civil No. ______________
(TO BE FILLED IN BY U.S. DISTRICT COURT CLERK)

MOTION AND DECLARATION UNDER PENALTY OF PERJURY IN SUPPORT OF MOTION TO PROCEED IN FORMA PAUPERIS

I, ARDY Demetrius Chadwick.,
declare that I am the Plaintiff/Petitioner/Movant in this case. In support of my request to proceed without prepayment of fees or security under 28 U.S.C. § 1915, I further declare I am unable to pay the fees of this proceeding or give security because of my poverty, and that I believe I am entitled to redress.

In further support of this application, I answer the following question under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No" go to question 2)
   If "Yes," state the place of your incarceration CMC
   Are you employed at the institution? ☐ Yes ☒ No
   Do you receive any payment from the institution? ☐ Yes ☒ No
   [Have the institution fill out the Certificate portion of this affidavit and attach a certified copy of the trust account statement from the institution of your incarceration showing at least the last six months transactions.]

2. Are you currently employed? ☐ Yes ☒ No
   a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

   b. If the answer is "No" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. 1986 ARDY Chadwick sr chadwick cons San Jacinto 5843 SKyline Dr San Diego CA 92114.

3. In the past twelve months have you received any money from any of the following sources?:
   a. Business, profession or other self-employment ☐ Yes ☒ No
   b. Rent payments, royalties interest or dividends ☐ Yes ☒ No
   c. Pensions, annuities or life insurance ☐ Yes ☒ No
   d. Disability or workers compensation ☐ Yes ☒ No
   e. Social Security, disability or other welfare ☐ Yes ☒ No
   e. Gifts or inheritances ☐ Yes ☒ No
   f. Spousal or child support ☐ Yes ☒ No
   g. Any other sources ☐ Yes ☒ No

   If the answer to any of the above is "Yes" describe each source and state the amount received and what you expect you will continue to receive each month.

4. Do you have any checking account(s)? ☐ Yes ☒ No
   a. Name(s) and address(es) of bank(s):
   b. Present balance in account(s):

5. Do you have any savings/IRA/money market/CDS' separate from checking accounts? ☐ Yes ☒ No
   a. Name(s) and address(es) of bank(s):
   b. Present balance in account(s):

6. Do you own an automobile or other motor vehicle? ☐ Yes ☒ No
   a. Make: Year: Model:
   b. Is it financed? ☐ Yes ☒ No
   c. If so, what is the amount owed?

7. Do you own any real estate, stocks, bonds, securities, other financial instruments, or other valuable property?
☐ Yes ☒ No
If "Yes" describe the property and state its value.______________________________

8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.______________________________

9. List any other debts (current obligations, indicating amounts owed and to whom they are payable):______________________________

10. List any other assets or items of value (specify real estate, gifts, trusts inheritances, government bonds, stocks, savings certificates, notes, jewelry, artwork, or any other assets [include any items of value held in someone else's name]):______________________________

12. If you answered all of the items in #3 "No," and have not indicated any other assets or sources of income anywhere on this form, you must explain the sources of funds for your day-to-day expenses. I don't have any founds coming in I did work for The Prison. But got laid off, from working in The main kentichen I am handy cap.

I declare under penalty of perjury that the above information is true and correct and understand that a false statement herein may result in the dismissal of my claims.

1/23/08
DATE

Chadwick ARDY Demetrius
SIGNATURE OF APPLICANT

If you are a **prisoner** you must have an officer from your institution provide this official certificate as to the amount of money in your prison account. There are no exceptions to this requirement.

PRISON CERTIFICATE
(Incarcerated applicants only)
(To be completed by the institution of incarceration)

I certify that the applicant Chadwick Arroy Demetrius,
(NAME OF INMATE)

T-13047,
(INMATE'S CDC NUMBER)

has the sum of $ -21.38 on account to his/her credit at

California Men's Colony State Prison.
(NAME OF INSTITUTION)

I further certify that the applicant has the following securities ——

to his/her credit according to the records of the aforementioned institution. I further certify that **during the past six months** the applicant's ***average monthly balance*** was $ 0,

and the ***average monthly deposits*** to the applicant's account was $ $2.40.

ALL PRISONERS ***MUST*** ATTACH A CERTIFIED COPY OF THEIR TRUST ACCOUNT STATEMENT SHOWING TRANSACTIONS FOR THE SIX-MONTH PERIOD IMMEDIATELY PRECEDING THE FILING OF THE COMPLAINT PER 28 U.S.C. § 1915(a)(2).

1-24-08
DATE

[signature]
SIGNATURE OF AUTHORIZED OFFICER OF INSTITUTION

D. BALDWIN
OFFICER'S FULL NAME (PRINTED)

CC I
OFFICER'S TITLE/RANK

TRUST ACCOUNT WITHDRAWAL AUTHORIZATION
(Incarcerated applicants only)

(This form **MUST** be completed by the prisoner requesting to proceed in forma pauperis. An incomplete "Trust Account Withdrawal Authorization Form," or "Prison Certificate" will result in automatic denial of the prisoner's request to proceed in forma pauperis.)

I, Chadwick Ardy T-13047, request and authorize the agency holding me in
(Name of Prisoner/ CDC No.)
custody to prepare for the Clerk of the United States District Court for the Southern District of California, a certified copy of the statement for the past six months of my trust fund account (or institutional equivalent) activity at the institution where I am incarcerated.

I further request and authorize the agency holding me in custody to calculate and disburse funds from my trust fund account (or institutional equivalent) pursuant to any future orders issued by the Court relating to this civil action pursuant to the Prison Litigation Reform Act of 1995, Pub. L. No. 104-134, Title VIII, §§ 801-10, 110 Stat. 1321 (1996).

This authorization is furnished in connection with a civil action filed in the Southern District of California, and I understand that, pursuant to 28 U.S.C. §§ 1914 and 1915(b)(1), the total amount of filing fees for which I am obligated is either ☐ $250 (civil complaint) or ☐ $5 (habeas corpus petition) (check one). I also understand that this fee will be debited from my account regardless of the outcome of this action. This authorization shall apply to any other agency into whose custody I may be transferred.

1/23/08
DATE

Chadwick Ardy D.
SIGNATURE OF PRISONER

REPORT ID: TS3030 .701 REPORT DATE: 01/24/08
PAGE NO: 1

CALIFORNIA DEPARTMENT OF CORRECTIONS
CALIFORNIA MENS COLONY
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: AUG. 01, 2007 THRU JAN. 24, 2008

ACCOUNT NUMBER : T13047 BED/CELL NUMBER: EFDQ07F300007320
ACCOUNT NAME : CHADWICK, ARDY ACCOUNT TYPE: I
PRIVILEGE GROUP: A

TRUST ACCOUNT ACTIVITY

DATE	TRAN CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
08/01/2007		BEGINNING BALANCE					0.00
12/03	*VD54	INMATE PAYROL 2365/08			5.41		5.41
12/03	*VD54	INMATE PAYROL 2365/08			3.89		9.30
12/06	FC01	DRAW-FAC 1	CE2			4.30	5.00
		ACTIVITY FOR 2008					
01/02	*VD54	INMATE PAYROL 2798/05			10.67		15.67
01/22	W512	LEGAL POSTAGE 3196				0.75	14.92

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
09/24/2007	H114	COPAY FEE, MED.	R1360	5.00
01/07/2008	H110	COPIES HOLD	2971	31.30

* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 04/06/01 CASE NUMBER: SCD157651
COUNTY CODE: SD FINE AMOUNT: $ 400.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
08/01/2007		BEGINNING BALANCE		400.00
12/03/07	VR54	RESTITUTION DEDUCTION-SUPPORT	6.01-	393.99
12/03/07	VR54	RESTITUTION DEDUCTION-SUPPORT	4.32-	389.67
01/02/08	VR54	RESTITUTION DEDUCTION-SUPPORT	11.85-	377.82

THE WITHIN INSTRUMENT IS A CORRECT COPY OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE.
ATTEST:
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY Deborah Myers
TRUST OFFICE 1/24/08

REPORT ID: T53030 .701 REPORT DATE: 01/24/08

PAGE NO: 2

CALIFORNIA MENS COLONY

INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: AUG. 01, 2007 THRU JAN. 24, 2008

ACCT: T13047 ACCT NAME: CHADWICK, ARDY ACCT TYPE: I

* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *
* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. *

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	19.97	5.05	14.92	36.30	0.00

CURRENT AVAILABLE BALANCE
21.38-

TS210B CALIFORNIA DEPARTMENT OF CORRECTIONS
TIPS TRUST ACCOUNT DISPLAY

---------------- ACCOUNT INFORMATION ---------------------- SPECIAL ITEMS --------

ACCOUNT NUMBER: T13047
ACCOUNT NAME: CHADWICK, ARDY
ACCOUNT TYPE: T
CURRENT BALANCE: [illegible]
HOLD BALANCE: 24.[illegible]
ENCUM. BALANCE: [illegible] ABNORMAL BALANCE
AVAILABLE: [illegible]
PRIVILEGE GROUP:
LAST CANTEEN:

------ DEPARTURE INFORMATION ------ ------ CORRECTIONS INFORMATION ----

DEPARTURE DATE: 08/2[illegible]/2007
DEPARTURE STATUS: PERM
TO LOCATION: CMC E
DEPARTURE COMMENT.

TS210BC BEGINNING DATE FOR TRANSACTION DISPLAY / /
No Account Activity for this period Enter date or press a function key.

REST FINES	DISPLAY HOLES	SELECT NEW ACCT	PRINT SCREEN	MAIN MENU

THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST:
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY C. Dale, 1-23-08
TRUST OFFICE

THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST:
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY [signature] 1-24-08
TRUST OFFICE